



AMENDMENTS TO THE CLAIMS

The following is a complete listing of all claims pending in the subject application with the status of each claim indicated in a parenthetical expression. The text of each claim under examination is presented, with currently amended claims including markings indicating the changes made relative to the immediate prior version. Claims under examination which are not amended herewith are presented in clean version.

1. - 14. (Canceled).

15. (Currently Amended) A method of making a medical ventilation tube comprising the steps of

forming a hollow tubular shaft from a first material having a rigidity to resist bending and to maintain a passage through the shaft when the ventilation tube is placed in an anatomical structure, said step of forming including forming the shaft to have an end with a circumferential end surface; and

forming a flange by molding the flange a flanged end portion onto the hollow tubular shaft using a second material having a rigidity less than that of the first material to permit the flange to deform in response to contact with the anatomical structure, said step of molding including molding a tubular section of the flanged end portion to the shaft only at the end surface such that the tubular section is in end to end abutment with the shaft at the end surface.

16. (Currently Amended) A method of making a medical ventilation tube as recited in claim 15 wherein said step of forming a flange includes placing the hollow tubular shaft within a mold having a cavity configured to form the flange flanged end portion.

17. (Currently Amended) A method of making a medical ventilation tube as recited in claim 16 wherein said step of forming a flange further includes injecting the second material into the mold to fill the cavity and thermally bond with the hollow tubular shaft at the end surface.

18. (Previously Presented) A method of making a medical ventilation tube as recited in claim 15 wherein said step of forming a flange further includes using a polymer having a durometer of about 50 as the second material.

19. (Original) A method of making a medical ventilation tube as recited in claim 15 wherein said step of forming a hollow tubular shaft includes extruding a continuous length of hollow tubing and cutting the hollow tubing to a predetermined length.

20. (Original) A method of making a medical ventilation tube as recited in claim 19 wherein said step of forming a hollow tubular shaft further includes using a polymer having a durometer of about 90 to about 95 as the first material.

21. (Canceled)

22. (Previously Presented) A method of making a medical ventilation tube comprising the steps of

molding an unfinished ventilation tube comprising a flanged end portion and a hollow tubular shaft of a first material having a rigidity sufficient for the hollow tubular shaft to resist bending and to maintain a passage through the shaft when the shaft is

placed in an anatomical structure;

cutting the flanged end portion away from the hollow tubular shaft; and

molding another flanged end portion onto the hollow tubular shaft using a second material having a rigidity less than that of the first material to form a finished ventilation tube in which the flanged end portion of the finished ventilation tube is permitted to deform in response to contact with the anatomical structure in which the hollow tubular shaft of the finished ventilation tube is placed.

23. (Currently Amended) A method of making a medical ventilation tube comprising the steps of

forming a hollow tubular shaft of the ventilation tube from a first material having a rigidity sufficient to resist bending and to maintain a passage through the shaft when the shaft is placed in an anatomical structure;

placing the hollow tubular shaft in a cavity of a mold ~~in which a portion of the cavity unoccupied by the shaft has~~ having an occupied portion completely filled by the entire shaft and an unoccupied portion having a configuration corresponding to the configuration of a flanged end portion of the ventilation tube; and

forming the flanged end portion of the ventilation tube of a second material, having a rigidity less than that of the first material to permit the flanged end portion to deform in response to contact with the anatomical structure in which the hollow tubular shaft is placed, by supplying the second material to the unoccupied portion of the cavity to form the flanged end portion molded onto the hollow tubular shaft in a finished ventilation tube.

24. (Currently Amended) A method of making a medical ventilation tube as

recited in claim 23 comprising the steps of

forming a hollow tubular shaft of the ventilation tube from a first material having a rigidity sufficient to resist bending and to maintain a passage through the shaft when the shaft is placed in an anatomical structure;

placing the hollow tubular shaft in a cavity of a mold in which a portion of the cavity unoccupied by the shaft has a configuration corresponding to the configuration of a flanged end portion of the ventilation tube; and

forming the flanged end portion of the ventilation tube of a second material, having a rigidity less than that of the first material to permit the flanged end portion to deform in response to contact with the anatomical structure in which the hollow tubular shaft is placed, by supplying the second material to the unoccupied portion of the cavity to form the flanged end portion molded onto the hollow tubular shaft in a finished ventilation tube;

wherein said step of forming a hollow tubular shaft includes the steps of supplying the first material to a cavity of a mold having a configuration corresponding to the configuration of the finished ventilation tube to obtain an unfinished ventilation tube including the hollow tubular shaft and a discardable flanged end portion molded together of the first material, and cutting the discardable flanged end portion of the unfinished ventilation tube away from the hollow tubular shaft.